

Meeting Minutes



Joint Commission on Health Care

Wednesday, August 22, 2018 – 9:00 a.m.

Senate Committee Room A- Pocahontas Building

Members Present

Delegate David L Bulova
Delegate Benjamin L. Cline
Delegate T. Scott Garrett, Vice Chair
Delegate C.E Cliff Hayes, Jr.
Delegate Patrick A. Hope
Delegate Riley E. Ingram
Delegate Kaye Kory
Delegate Christopher K. Peace
Delegate Christopher P. Stolle
Delegate Roslyn C. Tyler

Senator Charles W. Carrico, Sr.
Senator George L. Barker
Senator Rosalyn R. Dance, Chair
Senator Siobhan S. Dunnavant
Senator L. Louise Lucas
Senator Glenn H. Sturtevant, Jr.
Senator David R. Suetterlein

Members Absent

Senator John S. Edwards

Staff Present

Michele Chesser
Paula Margolis
Andrew Mitchell
Stephen Weiss
Agnes Dymora

Call to Order

Delegate Garrett called the meeting to order, welcomed all the members and introduced the first presenter.

Virginia's Plan for Well-Being

Norman Oliver, M.D., Virginia State Health Commissioner, presented an update to Virginia's Plan for Well-Being (VPWB). The VPWB is built upon a community infrastructure model of health improvement, recognizing that sustainable improvement requires both dealing with the burden of disease and breaking the cycle of debilitating disease. The community infrastructure model, aligned with focus and outcome measures, has a higher likelihood of bending the health care cost curve.

Dr. Oliver reviewed well-being measures that have improved during the current period and measures with little or no change, and he described district and state-level interventions. He also discussed the 2020 state health assessment and concluded by discussing future measures and goals for the 2020-2024 VPWB.

Virginia Department of Behavioral Health and Developmental Services (DBHDS) Implementation Update on 2018 General Assembly Directives

S. Hughes Melton, M.D., Commissioner, Virginia Department of Behavioral Health and Developmental Services began his presentation by reviewing the goals of *System Transformation Excellence and Performance* (STEP Virginia). The goals included

expanding access to services, Medicaid integration, strengthening quality and accountability, improving facilities, and completing a roadmap for the future. He then reviewed the status of the goals, 2018 legislative initiatives, and funding for state fiscal years 2018 and 2019.

Dr. Melton then provided updates on several projects, including: the pre-planning initiative for replacing Central State Hospital and other actions regarding justice involved behavioral health; electronic health records; addressing the addiction epidemic; the status of the Developmental Disabilities Waivers; grant activities, including the State Opioid Response; and, lastly, behavioral health Medicaid transformation.

Department of Medical Assistance Services (DMAS) Update for JCHC

Jennifer Lee, M.D., DMAS Director, began her presentation by discussing the populations receiving Medicaid and Childrens Health Insurance Program (CHIP) benefits and that ninety-six percent of enrollees receive services through managed care organizations (MCOs). She mentioned implementing a new website, a member advisory committee and a performance scorecard. Dr. Lee also displayed a template for a new performance scorecard and the redesigned DMAS website. In addition, Dr. Lee discussed the Medicaid expansion that began January 1, 2019, including expansion program requirements, such as the Training, Education, Employment and Opportunity Program (TEEOP), expansion financing and other Medicaid initiatives.

Opioid Prevention, Treatment and Recovery (OPT-R)

Ms. Mellie Randall, DBHDS Substance Use Disorder Policy Director, discussed funds authorized by the 21st Century CURES Act, administered by the Substance Abuse and Mental Health Services Administration (SAMHSA) to address opioid addiction. Virginia received \$9,762,332. Program goals include decreasing prescription drug and heroin overdoses, increase the number of individuals receiving treatment for opioid use disorder, and increase the number of individuals who receive recovery services. Thirty-five Community Services Boards (CSBs) were selected to receive funding, based on a review of several data sources and input from stakeholders. The report included data on first-year achievements and challenges to be addressed in the second year of funding. Additionally, Virginia received a three-year SAMHSA grant to address the needs of pregnant and post-partum women with substance use disorder. Nine CSBs received funding for this effort.

Staff Report: Medical Aid in Dying (MAID)

Presentation was rescheduled to September 18th due to lack of time.

Adjourn

Electronic Meeting:	NO
Prepared by:	Paula Margolis